

part of the toxicological evaluation, PDAPP mouse brain pathology was extensively examined as part of the efficacy endpoints. No sign of treatment related adverse effect on brain morphology was noted in any of the studies. These results indicate that AN1792 treatment is well tolerated and at least substantially free of side effects.

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XI. Therapeutic Treatment with Anti-A β antibodies

This examples tests the capacity of various monoclonal and polyclonal antibodies to A β to inhibit accumulation of A β in the brain of heterozygotic transgenic mice.

10 1. Study Design

Sixty male and female, heterozygous PDAPP transgenic mice, 8.5 to 10.5 months of age were obtained from Charles River Laboratory. The mice were sorted into six groups to be treated with various antibodies directed to A β . Animals were distributed to match the gender, age, parentage and source of the animals within the groups as closely as possible. As shown in Table 10, the antibodies included four murine A β -specific monoclonal antibodies, 2H3 (directed to A β residues 1-12), 10D5 (directed to A β residues 1-16), 266 (directed to A β residues 13-28 and binds to monomeric but not to aggregated AN1792), 21F12 (directed to A β residues 33-42). A fifth group was treated with an A β -specific polyclonal antibody fraction (raised by immunization with aggregated AN1792). The negative control group received the diluent, PBS, alone without antibody.

The monoclonal antibodies were injected at a dose of about 10 mg/kg (assuming that the mice weighed 50 g). Injections were administered intraperitoneally every seven days on average to maintain anti-A β titers above 1000. Although lower titers were measured for mAb 266 since it does not bind well to the aggregated AN1792 used as the capture antigen in the assay, the same dosing schedule was maintained for this group. The group receiving monoclonal antibody 2H3 was discontinued within the first three weeks since the antibody was cleared too rapidly in vivo. Animals were bled prior to each dosing for the measurement of antibody titers. Treatment was continued over a six-month period for a total of 196 days. Animals were euthanized one week after the final dose.

EXHIBIT A

Table 10

<u>EXPERIMENTAL DESIGN OF STUDY 006</u>				
Treatment Group	N ^a	Treatment Antibody	Antibody Specificity	Antibody Isotype
1	9	none (PBS alone)	NA ^b	NA
2	10	Polyclonal	A β 1-42	mixed
3	0	mAb ^c 2H3	A β 1-12	IgG1
4	8	mAb 10D5	A β 1-16	IgG1
5	6	mAb 266	A β 13-28	IgG1
6	8	mAb 21F12	A β 33-42	IgG2a

Footnotes

- a. Number of mice in group at termination of the experiment. All groups started with 10 animals per group.
b. NA: not applicable
c. mAb: monoclonal antibody

2. Materials and Methods

a. Preparation of the Antibodies

The anti-A β polyclonal antibody was prepared from blood collected from two groups of animals. The first group consisted of 100 female Swiss Webster mice, 6 to 8 weeks of age. They were immunized on days 0, 15, and 29 with 100 μ g of AN1792 combined with CFA/IFA. A fourth injection was given on day 36 with one-half the dose of AN1792. Animals were exsanguinated upon sacrifice at day 42, serum was prepared and the sera were pooled to create a total of 64 ml. The second group consisted of 24 female mice isogenic with the PDAPP mice but nontransgenic for the human APP gene, 6 to 9 weeks of age. They were immunized on days 0, 14, 28 and 56 with 100 μ g of AN1792 combined with CFA/IFA. These animals were also exsanguinated upon sacrifice at day 63, serum was prepared and pooled for a total of 14 ml. The two lots of sera were pooled. The antibody fraction was purified using two sequential rounds of precipitation with 50% saturated ammonium sulfate. The final precipitate was dialyzed against PBS and tested for endotoxin. The level of endotoxin was less than 1 EU/mg.

The anti-A β monoclonal antibodies were prepared from ascites fluid. The fluid was first delipidated by the addition of concentrated sodium dextran sulfate to ice-cold